

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H.		10-12-01
D.I.P.E. CLASSIFIER		10	10-9-01
FORMALITY REVIEW	S.H.	D85	10-23-01
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
" ..... Allowed      I ..... Interference  
(Through numeral) ..... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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